

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

**WESTERN DISTRICT OF VIRGINIA**

Case number (if known): \_\_\_\_\_

Chapter you are filing under:

- Chapter 7  
 Chapter 11  
 Chapter 12  
 Chapter 13

Check if this is an amended filing

**Official Form 101**

**Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself**

**About Debtor 1:**

**1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

**Michael**

First Name

**Wayne**

Middle Name

**Gunter**

Last Name

Suffix (Sr., Jr., II, III)

**About Debtor 2 (Spouse Only in a Joint Case):**

**2. All other names you have used in the last 8 years**

Include your married or maiden names.

First Name

Middle Name

Last Name

**Melissa**

First Name

**Kay**

Middle Name

**Blankenship**

Last Name

**Melissa**

First Name

**Kay**

Middle Name

**Blankenship**

Last Name

**Melissa**

First Name

**Blankenship**

Middle Name

**Layne**

Last Name

**3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**

**xxx - xx - 7 9 9 8**

OR

**9xx - xx - \_\_\_\_\_**

**xxx - xx - 7 4 9 8**

OR

**9xx - xx - \_\_\_\_\_**

Debtor 1 **Michael Wayne Gunter**  
 Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years**

Include trade names and doing business as names

**About Debtor 1:**

I have not used any business names or EINs.

Business name \_\_\_\_\_

Business name \_\_\_\_\_

Business name \_\_\_\_\_

EIN \_\_\_\_\_

EIN \_\_\_\_\_

**About Debtor 2 (Spouse Only in a Joint Case):**

I have not used any business names or EINs.

Business name \_\_\_\_\_

Business name \_\_\_\_\_

Business name \_\_\_\_\_

EIN \_\_\_\_\_

EIN \_\_\_\_\_

**5. Where you live**

**3101 Link Road, Apt. 78**

Number Street \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Lynchburg                    VA                    24503**  
 City                              State                      ZIP Code

**Lynchburg City**

County \_\_\_\_\_

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street \_\_\_\_\_

P.O. Box \_\_\_\_\_

City                              State                      ZIP Code

Number Street \_\_\_\_\_

\_\_\_\_\_

City                              State                      ZIP Code

County \_\_\_\_\_

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street \_\_\_\_\_

P.O. Box \_\_\_\_\_

City                              State                      ZIP Code

**6. Why you are choosing this district to file for bankruptcy**

Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain.  
 (See 28 U.S.C. § 1408.)

Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain.  
 (See 28 U.S.C. § 1408.)

**Part 2: Tell the Court About Your Bankruptcy Case**

**7. The chapter of the Bankruptcy Code you are choosing to file under**

Check one: (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

- Chapter 7  
 Chapter 11  
 Chapter 12  
 Chapter 13

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**8. How you will pay the fee**

- I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- I need to pay the fee in installments.** If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).
- I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.

**9. Have you filed for bankruptcy within the last 8 years?**

- No  
 Yes.

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

**10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?**

- No  
 Yes.

Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number, \_\_\_\_\_  
MM / DD / YYYY if known

Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number, \_\_\_\_\_  
MM / DD / YYYY if known

**11. Do you rent your residence?**

- No. Go to line 12.  
 Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?  
  
 No. Go to line 12.  
 Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 3: Report About Any Businesses You Own as a Sole Proprietor**

**12. Are you a sole proprietor of any full- or part-time business?**

- No. Go to Part 4.  
 Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number Street

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

*Check the appropriate box to describe your business:*

- Health Care Business (as defined in 11 U.S.C. § 101(27A))  
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
 Stockbroker (as defined in 11 U.S.C. § 101(53A))  
 Commodity Broker (as defined in 11 U.S.C. § 101(6))  
 None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

*If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).*

- No. I am not filing under Chapter 11.  
 No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  
 Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

**Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**

**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

- No  
 Yes. What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number Street  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Debtor 1 **Michael Wayne Gunter**  
 Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

### Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

**15. Tell the court whether you have received briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices.

If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

- Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

- Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 6: Answer These Questions for Reporting Purposes**

16. **What kind of debts do you have?**
- 16a. **Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
- No. Go to line 16b.  
 Yes. Go to line 17.
- 16b. **Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.
- No. Go to line 16c.  
 Yes. Go to line 17.
- 16c. State the type of debts you owe that are not consumer or business debts.
- 
17. **Are you filing under Chapter 7?**
- Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?
- No. I am not filing under Chapter 7. Go to line 18.  
 Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?  
 No  
 Yes
18. **How many creditors do you estimate that you owe?**
- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input type="checkbox"/> 50-99           | <input type="checkbox"/> 5,001-10,000  | <input type="checkbox"/> 50,001-100,000    |
| <input type="checkbox"/> 100-199         | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999         |  |  |
19. **How much do you estimate your assets to be worth?**
- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000      | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input type="checkbox"/> \$100,001-\$500,000     | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million   | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |
20. **How much do you estimate your liabilities to be?**
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000                   | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000             | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input checked="" type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million          | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 7: Sign Below**

**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X /s/ Michael Wayne Gunter**

Michael Wayne Gunter, Debtor 1

Executed on **05/09/2017**

MM / DD / YYYY

**X /s/ Melissa Kay Gunter**

Melissa Kay Gunter, Debtor 2

Executed on **05/09/2017**

MM / DD / YYYY

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**For your attorney, if you are represented by one**

**If you are not represented by an attorney, you do not need to file this page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

**X** /s/ Margaret C. Valois \_\_\_\_\_ Date 05/09/2017  
Signature of Attorney for Debtor MM / DD / YYYY

**Margaret C. Valois**

Printed name

**James River Legal Associates**

Firm Name

**7601 Timberlake Road**

Number Street

**Lynchburg**

City

**VA**

State

**24502**

ZIP Code

Contact phone (434) 845-4529

Email address mv@vbclegal.com

**66034**

Bar number

**VA**

State

Fill in this information to identify your case and this filing:

Debtor 1	Michael	Wayne	Gunter
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Melissa	Kay	Gunter
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>WESTERN DISTRICT OF VIRGINIA</u>			
Case number (if known) _____			

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- No. Go to Part 2.  
 Yes. Where is the property?

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here..... → \$0.00

**Part 2: Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- No  
 Yes

3.1.

Make: Dodge

**Who has an interest in the property?**

Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?**

\$5,930.00

**Current value of the portion you own?**

\$5,930.00

Approximate mileage: \_\_\_\_\_

Other information: \_\_\_\_\_

**2005 Dodge Durango**

Check if this is community property  
(see instructions)

3.2.

Make: Chrysler

**Who has an interest in the property?**

Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?**

\$13,400.00

**Current value of the portion you own?**

\$13,400.00

Approximate mileage: \_\_\_\_\_

Other information: \_\_\_\_\_

**2012 Chrysler Town & Country**

Check if this is community property  
(see instructions)

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

*Examples:* Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No  
 Yes

**5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....**

→ **\$19,330.00**

**Part 3: Describe Your Personal and Household Items**

**Do you own or have any legal or equitable interest in any of the following items?**

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**6. Household goods and furnishings**

*Examples:* Major appliances, furniture, linens, china, kitchenware

- No  
 Yes. Describe..... **See continuation page(s).**

**\$1,330.00**

**7. Electronics**

*Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- No  
 Yes. Describe..... **See continuation page(s).**

**\$700.00**

**8. Collectibles of value**

*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- No  
 Yes. Describe.....

**9. Equipment for sports and hobbies**

*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- No  
 Yes. Describe.....

**10. Firearms**

*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

- No  
 Yes. Describe.....

**11. Clothes**

*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

- No  
 Yes. Describe..... **Clothing**

**\$600.00**

**12. Jewelry**

*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

- No  
 Yes. Describe..... **Everyday Jewelry and Watches**  
**Wedding/Engagement Rings**

**\$500.00**

**13. Non-farm animals**

*Examples:* Dogs, cats, birds, horses

- No  
 Yes. Describe..... **Pet Cats (2)**

**\$20.00**

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

14. Any other personal and household items you did not already list, including any health aids you did not list

No  
 Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here.....

→ \$3,150.00

#### Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No  
 Yes..... Cash: ..... \$40.00

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No  
 Yes..... Institution name:

17.1. Checking account: **Wells Fargo Checking Account** \$5.00  
17.2. Checking account: **Wells Fargo Checking Account** \$1.00

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No  
 Yes..... Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No  
 Yes. Give specific information about them..... Name of entity: % of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

No  
 Yes. Give specific information about them..... Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No  
 Yes. List each account separately. Type of account: Institution name:

401(k) or similar plan: **Rent-A-Center, Inc. 401(k) Retirement Savings Plan** \$5,094.31

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company  
*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes.....

Institution name or individual:

**23. Annuities** (A contract for a specific periodic payment of money to you, either for life or for a number of years)

No

Yes..... Issuer name and description:

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

No

Yes. Give specific information about them

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;**

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them

**27. Licenses, franchises, and other general intangibles**

*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them

**Money or property owed to you?**

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

**Federal: Anticipated Federal Income Tax Refund  
Prorata based on 2016 refund in the amount of \$3,671.00  
of which \$1,000.00 is the Child Tax Credit. Amt: \$3,671.00**

Federal: \$8,005.00

State: \$266.00

Local: \$0.00

**Federal: Anticipated Federal Income Tax Refund  
Prorata based on 2016 refund in the amount of \$4,334.00  
of which \$1,000.00 is the Child Tax Credit and \$3,324.00 is the Earned Income Credit. Amt: \$4,334.00**

**State: Anticipated State Income Tax Refund  
Prorata based on 2016 refund in the amount of \$232.00.  
Amt: \$232.00**

**State: Anticipated State Income Tax Refund  
Prorata based on 2016 refund in the amount of \$34.00.  
Amt: \$34.00**

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**29. Family support**

*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

Yes. Give specific information

Alimony: \_\_\_\_\_

Maintenance: \_\_\_\_\_

Support: \_\_\_\_\_

Divorce settlement: \_\_\_\_\_

Property settlement: \_\_\_\_\_

**30. Other amounts someone owes you**

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

Yes. Give specific information

**31. Interests in insurance policies**

*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company of each policy

and list its value..... Company name:

Beneficiary:

Surrender or refund value:

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

No

Yes. Give specific information

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

*Examples:* Accidents, employment disputes, insurance claims, or rights to sue

No

Yes. Describe each claim.....

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

No

Yes. Describe each claim..... **Unknown or Undetermined Cause of Action**

**\$1.00**

**35. Any financial assets you did not already list**

No

Yes. Give specific information

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....** → **\$13,412.31**

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

**37. Do you own or have any legal or equitable interest in any business-related property?**

No. Go to Part 6.

Yes. Go to line 38.

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**38. Accounts receivable or commissions you already earned**

- No  
 Yes. Describe..

**39. Office equipment, furnishings, and supplies**

*Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- No  
 Yes. Describe..

**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**

- No  
 Yes. Describe..

**41. Inventory**

- No  
 Yes. Describe..

**42. Interests in partnerships or joint ventures**

- No  
 Yes. Describe..... Name of entity: % of ownership:

**43. Customer lists, mailing lists, or other compilations**

- No  
 Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  
 No  
 Yes. Describe.....

**44. Any business-related property you did not already list**

- No  
 Yes. Give specific information.

**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....**

→ **\$0.00**

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  
If you own or have an interest in farmland, list it in Part 1.**

**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- No. Go to Part 7.  
 Yes. Go to line 47.

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**47. Farm animals**

*Examples:* Livestock, poultry, farm-raised fish

- No  
 Yes....

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**48. Crops--either growing or harvested**

- No  
 Yes. Give specific information.....

**49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

- No  
 Yes....

**50. Farm and fishing supplies, chemicals, and feed**

- No  
 Yes....

**51. Any farm- and commercial fishing-related property you did not already list**

- No  
 Yes. Give specific information.....

**52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here.....** → \$0.00

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

**53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

- No  
 Yes. Give specific information.

**54. Add the dollar value of all of your entries from Part 7. Write that number here.....** → \$0.00

**Part 8: List the Totals of Each Part of this Form**

**55. Part 1: Total real estate, line 2.....** → \$0.00

**56. Part 2: Total vehicles, line 5** \$19,330.00

**57. Part 3: Total personal and household items, line 15** \$3,150.00

**58. Part 4: Total financial assets, line 36** \$13,412.31

**59. Part 5: Total business-related property, line 45** \$0.00

**60. Part 6: Total farm- and fishing-related property, line 52** \$0.00

**61. Part 7: Total other property not listed, line 54** + \$0.00

**62. Total personal property. Add lines 56 through 61.....** \$35,892.31 Copy personal property total → + \$35,892.31

**63. Total of all property on Schedule A/B. Add line 55 + line 62.....** \$35,892.31

Debtor 1 Michael Wayne Gunter  
Debtor 2 Melissa Kay Gunter Case number (if known) \_\_\_\_\_

6. Household goods and furnishings (details):

<b>Bedroom Furniture - (2) Bedroom</b>	<u>\$450.00</u>
<b>Books, Pictures and Home Decor Items</b>	<u>\$75.00</u>
<b>Dishes, Pots and Pans, Utensils and Small Kitchen Appliances</b>	<u>\$80.00</u>
<b>Kitchen Table and Chairs</b>	<u>\$125.00</u>
<b>Living Room Furniture</b>	<u>\$450.00</u>
<b>Stove</b>	<u>\$150.00</u>

7. Electronics (details):

<b>Televisions (2); DVD/BlueRay Players (2/1)</b>	<u>\$500.00</u>
<b>PSIII Game Console and Accessories</b>	
<b>Television</b>	<u>\$200.00</u>

**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b> First Name	<b>Wayne</b> Middle Name	<b>Gunter</b> Last Name
Debtor 2 (Spouse, if filing)	<b>Melissa</b> First Name	<b>Kay</b> Middle Name	<b>Gunter</b> Last Name

United States Bankruptcy Court for the: **WESTERN DISTRICT OF VIRGINIA**

Case number  
(if known) \_\_\_\_\_

Check if this is an amended filing

**Official Form 106C**

**Schedule C: The Property You Claim as Exempt**

**04/16**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
--	--------------------------------------	-----------------------------------	------------------------------------

Brief description: <b>2005 Dodge Durango</b> (1st exemption claimed for this asset) Line from <i>Schedule A/B</i> : <u>3.1</u>	Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption</i>	<b>Va. Code Ann. § 34-26(8)</b>
	<b>\$5,930.00</b>	<input checked="" type="checkbox"/> <b>\$0.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

Brief description: <b>2005 Dodge Durango</b> (2nd exemption claimed for this asset) Line from <i>Schedule A/B</i> : <u>3.1</u>	<b>\$5,930.00</b>	<input checked="" type="checkbox"/> <b>\$0.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-4</b>
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3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- No  
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
 No  
 Yes

Debtor 1 **Michael Wayne Gunter**  
 Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption</i>
Brief description: <b>2012 Chrysler Town &amp; Country (1st exemption claimed for this asset)</b> Line from <i>Schedule A/B</i> : <u>3.2</u>	<u>\$13,400.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-26(8)</b>
Brief description: <b>2012 Chrysler Town &amp; Country (2nd exemption claimed for this asset)</b> Line from <i>Schedule A/B</i> : <u>3.2</u>	<u>\$13,400.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-4</b>
Brief description: <b>Bedroom Furniture - (2) Bedroom</b> Line from <i>Schedule A/B</i> : <u>6</u>	<u>\$450.00</u>	<input checked="" type="checkbox"/> <u>\$450.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-26(4a)</b>
Brief description: <b>Books, Pictures and Home Decor Items</b> Line from <i>Schedule A/B</i> : <u>6</u>	<u>\$75.00</u>	<input checked="" type="checkbox"/> <u>\$75.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-26(4a)</b>
Brief description: <b>Dishes, Pots and Pans, Utensils and Small Kitchen Appliances</b> Line from <i>Schedule A/B</i> : <u>6</u>	<u>\$80.00</u>	<input checked="" type="checkbox"/> <u>\$80.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-26(4a)</b>
Brief description: <b>Kitchen Table and Chairs</b> Line from <i>Schedule A/B</i> : <u>6</u>	<u>\$125.00</u>	<input checked="" type="checkbox"/> <u>\$125.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-26(4a)</b>
Brief description: <b>Living Room Furniture</b> Line from <i>Schedule A/B</i> : <u>6</u>	<u>\$450.00</u>	<input checked="" type="checkbox"/> <u>\$450.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-26(4a)</b>
Brief description: <b>Stove</b> Line from <i>Schedule A/B</i> : <u>6</u>	<u>\$150.00</u>	<input checked="" type="checkbox"/> <u>\$150.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-26(4a)</b>
Brief description: <b>Televisions (2); DVD/BlueRay Players (2/1) PSIII Game Console and Accessories</b> Line from <i>Schedule A/B</i> : <u>7</u>	<u>\$500.00</u>	<input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-26(4a)</b>

Debtor 1 **Michael Wayne Gunter**  
 Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption
Brief description: <b>Television</b>	<u>\$200.00</u>	<input checked="" type="checkbox"/> <b>\$1.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-26(4a)</b>
Line from Schedule A/B: <u>7</u>			
Brief description: <b>Clothing</b>	<u>\$600.00</u>	<input checked="" type="checkbox"/> <b>\$600.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-26(4)</b>
Line from Schedule A/B: <u>11</u>			
Brief description: <b>Everyday Jewelry and Watches</b> <b>Wedding/Engagement Rings</b> (1st exemption claimed for this asset)	<u>\$500.00</u>	<input checked="" type="checkbox"/> <b>\$250.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-4</b>
Line from Schedule A/B: <u>12</u>			
Brief description: <b>Everyday Jewelry and Watches</b> <b>Wedding/Engagement Rings</b> (2nd exemption claimed for this asset)	<u>\$500.00</u>	<input checked="" type="checkbox"/> <b>\$250.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-26(1a)</b>
Line from Schedule A/B: <u>12</u>			
Brief description: <b>Pet Cats (2)</b>	<u>\$20.00</u>	<input checked="" type="checkbox"/> <b>\$20.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-26(5)</b>
Line from Schedule A/B: <u>13</u>			
Brief description: <b>Cash on Hand</b>	<u>\$40.00</u>	<input checked="" type="checkbox"/> <b>\$40.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-4</b>
Line from Schedule A/B: <u>16</u>			
Brief description: <b>Wells Fargo Checking Account</b>	<u>\$5.00</u>	<input checked="" type="checkbox"/> <b>\$5.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-4</b>
Line from Schedule A/B: <u>17.1</u>			
Brief description: <b>Wells Fargo Checking Account</b>	<u>\$1.00</u>	<input checked="" type="checkbox"/> <b>\$1.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-4</b>
Line from Schedule A/B: <u>17.2</u>			
Brief description: <b>Rent-A-Center, Inc. 401(k) Retirement Savings Plan</b>	<u>\$5,094.31</u>	<input checked="" type="checkbox"/> <b>\$5,094.31</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-34</b>
Line from Schedule A/B: <u>21</u>			

Debtor 1 **Michael Wayne Gunter**  
 Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
<b>Brief description:</b> <b>Anticipated Federal Income Tax Refund Prorata based on 2016 refund in the amount of \$3,671.00 of which \$1,000.00 is the Child Tax Credit</b> <b>(1st exemption claimed for this asset)</b> Line from <i>Schedule A/B</i> : <u>28</u>	\$3,671.00	<input checked="" type="checkbox"/> <b>\$1,113.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-4</b>
<b>Brief description:</b> <b>Anticipated Federal Income Tax Refund Prorata based on 2016 refund in the amount of \$3,671.00 of which \$1,000.00 is the Child Tax Credit</b> <b>(2nd exemption claimed for this asset)</b> Line from <i>Schedule A/B</i> : <u>28</u>	\$3,671.00	<input checked="" type="checkbox"/> <b>\$1,000.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-26(9)</b>
<b>Brief description:</b> <b>Anticipated State Income Tax Refund Prorata based on 2016 refund in the amount of \$232.00</b> Line from <i>Schedule A/B</i> : <u>28</u>	\$232.00	<input checked="" type="checkbox"/> <b>\$97.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-4</b>
<b>Brief description:</b> <b>Anticipated Federal Income Tax Refund Prorata based on 2016 refund in the amount of \$4,334.00 of which \$1,000.00 is the Child Tax Credit and \$3,324.00 is the Earned Income Credit.</b> <b>(1st exemption claimed for this asset)</b> Line from <i>Schedule A/B</i> : <u>28</u>	\$4,334.00	<input checked="" type="checkbox"/> <b>\$4.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-4</b>
<b>Brief description:</b> <b>Anticipated Federal Income Tax Refund Prorata based on 2016 refund in the amount of \$4,334.00 of which \$1,000.00 is the Child Tax Credit and \$3,324.00 is the Earned Income Credit.</b> <b>(2nd exemption claimed for this asset)</b> Line from <i>Schedule A/B</i> : <u>28</u>	\$4,334.00	<input checked="" type="checkbox"/> <b>\$4,324.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-26(9)</b>
<b>Brief description:</b> <b>Anticipated State Income Tax Refund Prorata based on 2016 refund in the amount of \$34.00</b> <b>(1st exemption claimed for this asset)</b> Line from <i>Schedule A/B</i> : <u>28</u>	\$34.00	<input checked="" type="checkbox"/> <b>\$14.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Va. Code Ann. § 34-4</b>

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
<p>Brief description: <b>Anticipated State Income Tax Refund Prorata based on 2016 refund in the amount of \$34.00</b> <b>(2nd exemption claimed for this asset)</b></p> <p>Line from <i>Schedule A/B</i>: <u>28</u></p>	<p>Copy the value from <i>Schedule A/B</i></p> <p><u>\$34.00</u></p>	<p><i>Check only one box for each exemption</i></p> <p><input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit</p>	<b>Va. Code Ann. § 34-26(9)</b>
<p>Brief description: <b>Unknown or Undetermined Cause of Action</b> <b>(1st exemption claimed for this asset)</b></p> <p>Line from <i>Schedule A/B</i>: <u>34</u></p>	<u>\$1.00</u>	<p><input checked="" type="checkbox"/> <u>\$1.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit</p>	<b>Va. Code Ann. § 34-4</b>
<p>Brief description: <b>Unknown or Undetermined Cause of Action</b> <b>(2nd exemption claimed for this asset)</b></p> <p>Line from <i>Schedule A/B</i>: <u>34</u></p>	<u>\$1.00</u>	<p><input checked="" type="checkbox"/> <u>\$1.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit</p>	<b>Va. Code Ann. § 34-28.1</b>
<p>Brief description: <b>Unknown or Undetermined Cause of Action</b> <b>(3rd exemption claimed for this asset)</b></p> <p>Line from <i>Schedule A/B</i>: <u>34</u></p>	<u>\$1.00</u>	<p><input checked="" type="checkbox"/> <u>\$1.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit</p>	<b>Va. Code Ann. § 65.2-531</b>

**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b> First Name	<b>Wayne</b> Middle Name	<b>Gunter</b> Last Name
Debtor 2 (Spouse, if filing)	<b>Melissa</b> First Name	<b>Kay</b> Middle Name	<b>Gunter</b> Last Name
United States Bankruptcy Court for the: <b>WESTERN DISTRICT OF VIRGINIA</b>			
Case number (if known)		<input type="checkbox"/> Check if this is an amended filing	

Official Form 106D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

- 2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

<b>Column A Amount of claim Do not deduct the value of collateral</b>	<b>Column B Value of collateral that supports this claim</b>	<b>Column C Unsecured portion If any</b>
\$100.00	\$200.00	

2.1

Describe the property that  
secures the claim:

\$100.00

\$200.00

Rent-A-Center

Creditor's name

2323 Memorial Ave.

Number Street

Television

Lynchburg VA 24501  
City State ZIP Code

**As of the date you file, the claim is:** Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Who owes the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim relates  
to a community debt

**Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset)

Other

Date debt was incurred

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write  
that number here:

\$100.00

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 1:**

**Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

**Column A**  
**Amount of claim**  
Do not deduct the value of collateral

**Column B**  
**Value of collateral that supports this claim**

**Column C**  
**Unsecured portion If any**

2.2

Describe the property that secures the claim:

\$28,441.00

\$19,330.00

\$9,111.00

**VA League Central Credit Union**

Creditor's name

**PO Box 11469**

Number Street

2005 Dodge Durango

**As of the date you file, the claim is:** Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Who owes the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this claim relates to a community debt

**Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

**Purchase Money**

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here:

\$28,441.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$28,541.00

Debtor 1 Michael Wayne Gunter  
Debtor 2 Melissa Kay Gunter

Case number (if known) \_\_\_\_\_

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

1	<b>Beacon Credit Union</b> Name <b>Attn: Bankruptcy Department</b> Number Street <b>PO Box 4319</b>	On which line in Part 1 did you enter the creditor? <u>2.2</u>
		Last 4 digits of account number _____
	<b>Lynchburg</b> City	<b>VA      24502</b> State    ZIP Code

**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b> First Name	<b>Wayne</b> Middle Name	<b>Gunter</b> Last Name
Debtor 2 (Spouse, if filing)	<b>Melissa</b> First Name	<b>Kay</b> Middle Name	<b>Gunter</b> Last Name
United States Bankruptcy Court for the: <b>WESTERN DISTRICT OF VIRGINIA</b>			
Case number (if known) _____			

Check if this is an amended filing

**Official Form 106E/F**

**Schedule E/F: Creditors Who Have Unsecured Claims**

**12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.  
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
\$421.17	\$421.17	\$0.00

2.1	\$421.17	\$421.17	\$0.00
<b>The City of Lynchburg, Virginia</b> Priority Creditor's Name	Last 4 digits of account number		
<b>Billings &amp; Collections</b> Number Street	When was the debt incurred?		
<b>PO Box 9000, Lynchburg, VA 24505</b>	As of the date you file, the claim is: Check all that apply.		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
City	State	ZIP Code	
<b>Who incurred the debt?</b> Check one.			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
<b>Type of PRIORITY unsecured claim:</b>			
<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____			
<b>Is the claim subject to offset?</b>			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 1: Your PRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim	Priority amount	Nonpriority amount
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2.2	\$167.52	\$167.52	\$0.00
-----	----------	----------	--------

**The City of Lynchburg, Virginia**

Priority Creditor's Name

**Billings & Collections**

Number Street

**PO Box 9000, Lynchburg, VA 24505**

Last 4 digits of account number

When was the debt incurred?

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Type of PRIORITY unsecured claim:**

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify

**Is the claim subject to offset?**

- No  
 Yes

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.**

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

**Total claim**

4.1	<p><b>Appalachian Power</b> Nonpriority Creditor's Name <b>PO Box 24401</b> Number Street _____</p> <p><b>Canton OH 44701</b> City _____ State _____ ZIP Code _____</p> <p><b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$91.00</b>
<p><b>Last 4 digits of account number</b> _____</p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Utility</b></p>		
4.2	<p><b>Capital One</b> Nonpriority Creditor's Name <b>PO Box 30285</b> Number Street _____</p> <p><b>Salt Lake City UT 84130-0285</b> City _____ State _____ ZIP Code _____</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$692.00</b>
<p><b>Last 4 digits of account number</b> _____</p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p>		

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.3		<b>\$243.00</b>
<b>Centra Emergency Services</b> Nonpriority Creditor's Name <b>2010 Atherholt Rd</b> Number Street		Last 4 digits of account number _____
		When was the debt incurred? _____
		As of the date you file, the claim is: Check all that apply.
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Lynchburg</b> <b>VA</b> <b>24501</b> City                  State                  ZIP Code		Type of NONPRIORITY unsecured claim:
Who incurred the debt? Check one.		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Medical Bill</b>
Is the claim subject to offset?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.4		<b>\$77.00</b>
<b>Centra Medical Group</b> Nonpriority Creditor's Name <b>PO Box 14000</b> Number Street		Last 4 digits of account number _____
		When was the debt incurred? _____
		As of the date you file, the claim is: Check all that apply.
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Belfast</b> <b>ME</b> <b>04915</b> City                  State                  ZIP Code		Type of NONPRIORITY unsecured claim:
Who incurred the debt? Check one.		<input type="checkbox"/> Student loans <input checked="" type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify <b>Medical Bill</b>
Is the claim subject to offset?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.5		<b>\$37,000.00</b>
<b>Chase Mortgage</b> Nonpriority Creditor's Name <b>PO Box 24696</b> Number Street		Last 4 digits of account number _____ When was the debt incurred? _____
		As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Columbus OH 43224</b> City State ZIP Code		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Purchase Money</b>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>Foreclosure</b> <b>Deficiency Balance</b>		
4.6		<b>\$2,176.00</b>
<b>CNAC/TMC Finance, LLC</b> Nonpriority Creditor's Name <b>2828 Candlers Mountain Rd</b> Number Street		Last 4 digits of account number _____ When was the debt incurred? _____
		As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Lynchburg VA 24502</b> City State ZIP Code		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Repossession Deficiency Balance</b>
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor 1 **Michael Wayne Gunter**  
 Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.7	<p><b>Comcast</b>          Nonpriority Creditor's Name  <b>2820 Linkhorne Dr</b>          Number Street          _____</p> <p><b>Lynchburg VA 24503</b>          City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input type="checkbox"/> Debtor 1 only  <input checked="" type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<b>\$151.00</b>
<p><b>Last 4 digits of account number</b> _____</p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Other</b></p>		
<p><b>4.8</b></p> <p><b>Cone Health</b>          Nonpriority Creditor's Name  <b>PO Box 650292</b>          Number Street          _____</p> <p><b>Dallas TX 75265</b>          City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>		<b>\$526.81</b>
<p><b>Last 4 digits of account number</b> _____</p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Medical Bill</b></p>		
<p><b>4.9</b></p> <p><b>Creditors Collection Service</b>          Nonpriority Creditor's Name  <b>PO Box 1022</b>          Number Street          _____</p> <p><b>Wixom MI 48393</b>          City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>		<b>\$243.00</b>
<p><b>Last 4 digits of account number</b> _____</p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Collecting for -</b></p>		

Debtor 1 **Michael Wayne Gunter**  
 Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.10

\$271.73

**Dish Network**

Nonpriority Creditor's Name

**PO Box 94063**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Palatine IL 60094**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Utility Bill**

4.11

\$876.49

**First Virginia Financial Services, Inc.**

Nonpriority Creditor's Name

**3226 Old Forest Rd.**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Lynchburg VA 24501**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Card**

4.12

\$29.00

**Greensboro Radiology**

Nonpriority Creditor's Name

**1331 N Elm St #200**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Greensboro NC 27401**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Medical Bill**

Debtor 1 **Michael Wayne Gunter**  
 Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.13

\$4,927.00

### Lendmark Financial Services

Nonpriority Creditor's Name

**18013 Forest Rd, Ste. A-08**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Forest      VA      24551**

City                  State                  ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Loan**

4.14

\$2,500.00

### Lendmark Financial Services

Nonpriority Creditor's Name

**18013 Forest Rd, Ste. A-08**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Forest      VA      24551**

City                  State                  ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Loan**

4.15

\$2,584.50

### Lokate LLC

Nonpriority Creditor's Name

**c/o Brownstone Properties, Inc.**

Number Street

**3720 Old Forest Rd.**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Lynchburg      VA      24501**

City                  State                  ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Judgment**

Debtor 1 **Michael Wayne Gunter**  
 Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.16

\$807.41

**Lynchburg General Hospital**

Nonpriority Creditor's Name

**1901 Tate Springs Road**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Lynchburg VA 24501**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Medical Bill**

4.17

\$5,944.00

**Navy Federal Credit Union**

Nonpriority Creditor's Name

**820 Follin Ln**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Vienna VA 22180**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Credit Card**

4.18

\$19,730.00

**Navy Federal Credit Union**

Nonpriority Creditor's Name

**820 Follin Ln**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Vienna VA 22180**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Purchase Money**

Debtor 1 **Michael Wayne Gunter**  
 Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.19

\$91.00

### Online Collections

Nonpriority Creditor's Name

**PO Box 1489**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Winterville NC 28590**

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Collecting for -**

4.20

\$45.60

### State Farm Life Insurance Company

Nonpriority Creditor's Name

**PO Box 2364**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Bloomington IL 61702**

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Insurance**

4.21

\$184.61

### SunTrust

Nonpriority Creditor's Name

**PO Box 6600**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Hagerstown MD 21741**

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Overdrawn Account**

Debtor 1 **Michael Wayne Gunter**  
 Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.22

\$202.82

**Target Corporation**  
 Nonpriority Creditor's Name  
**c/o The Law Offices Michael I. Asen, PC**  
 Number Street  
**2200 Northern Blvd, Ste. 110**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Greenvale NY 11548**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Other**

4.23

\$279.00

**The Moses H. Cone Memorial Hospital**  
 Nonpriority Creditor's Name  
**1121 N Church St**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Greensboro NC 27401**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Medical Bill**

4.24

\$30,505.00

**US Department of Education**  
 Nonpriority Creditor's Name  
**Direct Loan Servicing Center**  
 Number Street  
**PO Box 5609**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Greenville TX 75403**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.25

**\$1,093.00**

**Verizon Wireless**

Nonpriority Creditor's Name

**PO Box 5029**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Wallingford CT 06492**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Utility Bill**

4.26

**\$1.00**

**Virginia Department of Social Services**

Nonpriority Creditor's Name

**801 E Main Street**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Richmond VA 23219**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Other**

**Is the claim subject to offset?**

- No
- Yes

**SNAP**

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

**Convergent Outsourcing, Inc.**

On which entry in Part 1 or Part 2 did you list the original creditor?

Name  
**PO Box 1022**  
Number Street

Line 4.10 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

City **Wixom** State **MI** ZIP Code **48393**

Last 4 digits of account number — — — —

**Creditors Collection Service**

On which entry in Part 1 or Part 2 did you list the original creditor?

Name  
**PO Box 1022**  
Number Street

Line 4.4 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

City **Wixom** State **MI** ZIP Code **48393**

Last 4 digits of account number — — — —

**Creditors Collection Service**

On which entry in Part 1 or Part 2 did you list the original creditor?

Name  
**PO Box 1022**  
Number Street

Line 4.3 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

City **Wixom** State **MI** ZIP Code **48393**

Last 4 digits of account number — — — —

**EOS CCA**

On which entry in Part 1 or Part 2 did you list the original creditor?

Name  
**700 Longwater Dr**  
Number Street

Line 4.25 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

City **Norwell** State **MA** ZIP Code **02061**

Last 4 digits of account number — — — —

**Internal Revenue Service**

On which entry in Part 1 or Part 2 did you list the original creditor?

Name  
**P O Box 7346**  
Number Street

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

City **Philadelphia** State **PA** ZIP Code **19114-7346**

Last 4 digits of account number — — — —

Debtor 1 Michael Wayne Gunter  
Debtor 2 Melissa Kay Gunter

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**J. Frederick Watson, Esq.**

On which entry in Part 1 or Part 2 did you list the original creditor?

Name  
**CASKIE & FROST**  
Number Street  
**2306 Atherholt Road**

Line 4.6 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Lynchburg VA 24501**  
City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**Joyce Carter**

On which entry in Part 1 or Part 2 did you list the original creditor?

Name  
**3101 Link Road, Apt. 78**  
Number Street  
City

Line 4.14 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Lynchburg VA 24503**  
City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**Lendmark Financial Services**

On which entry in Part 1 or Part 2 did you list the original creditor?

Name  
**105 Clarion Rd, Ste. K**  
Number Street

Line 4.14 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Altavista VA 24517**  
City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**Lynchburg General District Court**

On which entry in Part 1 or Part 2 did you list the original creditor?

Name  
**905 Court St**  
Number Street

Line 4.15 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Lynchburg VA 24504**  
City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**Optimum Outcomes, Inc.**

On which entry in Part 1 or Part 2 did you list the original creditor?

Name  
**PO Box 660943**  
Number Street

Line 4.23 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Dallas TX 75266**  
City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**SCA Credit Services, Inc.**

On which entry in Part 1 or Part 2 did you list the original creditor?

Name  
**1502 Williamson Rd NE**  
Number Street

Line 4.16 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Roanoke VA 24012**  
City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Southwest Credit Systems**

On which entry in Part 1 or Part 2 did you list the original creditor?

Name  
**4120 International Parkway**  
Number Street  
**Suite 1100**

Line 4.7 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Carrollton TX 75007**  
City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**SRS, Inc.**

On which entry in Part 1 or Part 2 did you list the original creditor?

Name  
**415 N Edgeworth St, Ste. 210**  
Number Street  
**P O Box 2156**

Line 4.12 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Greensboro NC 27401**  
City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**Va Department Of Taxation**

On which entry in Part 1 or Part 2 did you list the original creditor?

Name  
**Bankruptcy Unit**  
Number Street  
**P O Box 2156**

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Richmond VA 23218-0000**  
City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.  
28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

	Total claim
<b>Total claims from Part 1</b>	
6a. Domestic support obligations	6a. <u>\$0.00</u>
6b. Taxes and certain other debts you owe the government	6b. <u>\$588.69</u>
6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
6e. Total. Add lines 6a through 6d.	6d. <u><b>\$588.69</b></u>

	Total claim
<b>Total claims from Part 2</b>	
6f. Student loans	6f. <u>\$30,505.00</u>
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$80,766.97</u>
6j. Total. Add lines 6f through 6i.	6j. <u><b>\$111,271.97</b></u>

**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b> First Name	<b>Wayne</b> Middle Name	<b>Gunter</b> Last Name
Debtor 2 (Spouse, if filing)	<b>Melissa</b> First Name	<b>Kay</b> Middle Name	<b>Gunter</b> Last Name
United States Bankruptcy Court for the: <b>WESTERN DISTRICT OF VIRGINIA</b>			
Case number (if known)		<input type="checkbox"/> Check if this is an amended filing	

Official Form 106G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

**1. Do you have any executory contracts or unexpired leases?**

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

**2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.**

Person or company with whom you have the contract or lease

State what the contract or lease is for

2.1 Suntan City

Name \_\_\_\_\_  
Number Street \_\_\_\_\_  
\_\_\_\_\_

**1-Year Tanning Salon Contract  
Contract to be ASSUMED**

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Fill in this information to identify your case:			
Debtor 1	<b>Michael</b> First Name	<b>Wayne</b> Middle Name	<b>Gunter</b> Last Name
Debtor 2 (Spouse, if filing)	<b>Melissa</b> First Name	<b>Kay</b> Middle Name	<b>Gunter</b> Last Name
United States Bankruptcy Court for the: <b>WESTERN DISTRICT OF VIRGINIA</b>			
Case number (if known)		<input type="checkbox"/> Check if this is an amended filing	

## Official Form 106H

### Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No  
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.  
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  
 No  
 Yes

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

#### Column 1: Your codebtor

3.1 **Joyce Carter**  
Name  
**3101 Link Rd, Apt. 87**  
Number Street

**Lynchburg**                   **VA**                   **24503**  
City                              State                      ZIP Code

3.2 **Joyce Carter**  
Name  
**3101 Link Rd #78**  
Number Street

**Lynchburg**                   **VA**                   **24503**  
City                              State                      ZIP Code

#### Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Schedule D, line \_\_\_\_\_

Schedule E/F, line **2.1**

Schedule G, line \_\_\_\_\_

**The City of Lynchburg, Virginia**

Schedule D, line \_\_\_\_\_

Schedule E/F, line **4.15**

Schedule G, line \_\_\_\_\_

**Lokate LLC**

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Additional Page to List More Codebtors**

**Column 1: Your codebtor**

**Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

3.3

**Joyce Carter**

Name  
**3101 Link Rd, Apt. 87**

Number Street

**Lynchburg**

City

**VA**

State

**24503**

ZIP Code

Schedule D, line **2.2**

Schedule E/F, line \_\_\_\_\_

Schedule G, line \_\_\_\_\_

**VA League Central Credit Union**

3.4

**Joyce Carter**

Name  
**3101 Link Rd, Apt. 87**

Number Street

**Lynchburg**

City

**VA**

State

**24503**

ZIP Code

Schedule D, line \_\_\_\_\_

Schedule E/F, line **4.13**

Schedule G, line \_\_\_\_\_

**Lendmark Financial Services**

3.5

**Joyce Carter**

Name  
**3101 Link Road, Apt. 78**

Number Street

**Lynchburg**

City

**VA**

State

**24503**

ZIP Code

Schedule D, line \_\_\_\_\_

Schedule E/F, line **4.14**

Schedule G, line \_\_\_\_\_

**Lendmark Financial Services**

**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b> First Name	<b>Wayne</b> Middle Name	<b>Gunter</b> Last Name
Debtor 2 (Spouse, if filing)	<b>Melissa</b> First Name	<b>Kay</b> Middle Name	<b>Gunter</b> Last Name
United States Bankruptcy Court for the: <b>WESTERN DISTRICT OF VIRGINIA</b>			
Case number (if known)			

Check if this is an amended filing

**Official Form 106Sum**

**Summary of Your Assets and Liabilities and Certain Statistical Information**

**12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

**Part 1: Summarize Your Assets**

**Your assets**  
Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B.....	<b>\$0.00</b>
1b. Copy line 62, Total personal property, from Schedule A/B.....	<b>\$35,892.31</b>
1c. Copy line 63, Total of all property on Schedule A/B.....	<b>\$35,892.31</b>

**Part 2: Summarize Your Liabilities**

**Your liabilities**  
Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D..... **\$28,541.00**

3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... **\$588.69**

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... + **\$111,271.97**

**Your total liabilities** **\$140,401.66**

**Part 3: Summarize Your Income and Expenses**

4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I..... **\$2,313.56**

5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J..... **\$2,842.00**

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 4: Answer These Questions for Administrative and Statistical Records**

**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
 Yes

**7. What kind of debt do you have?**

- Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  
 **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

**\$4,015.51**

**9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

**Total claim**

**From Part 4 on Schedule E/F, copy the following:**

9a. Domestic support obligations. (Copy line 6a.)	<b>\$0.00</b>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<b>\$588.69</b>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<b>\$0.00</b>
9d. Student loans. (Copy line 6f.)	<b>\$30,505.00</b>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<b>\$0.00</b>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	<b>+ \$0.00</b>
9g. <b>Total.</b> Add lines 9a through 9f.	<b>\$31,093.69</b>

**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b>	<b>Wayne</b>	<b>Gunter</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Melissa</b>	<b>Kay</b>	<b>Gunter</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>WESTERN DISTRICT OF VIRGINIA</b>		
Case number (if known)			

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

12/15

**Schedule I: Your Income**

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment**

**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	<b>Debtor 1</b>	<b>Debtor 2 or non-filing spouse</b>
<b>Employment status</b>	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed
<b>Occupation</b>	<b>Assistant Manager</b>	
<b>Employer's name</b>	<b>Rent-A-Center</b>	
<b>Employer's address</b>	<b>5501 Headquarters Drive</b> Number Street	
<b>Plano</b>	<b>TX</b>	<b>75024</b>
City	State	Zip Code

How long employed there? **10 Years**

**Part 2: Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	<b>For Debtor 1</b>	<b>For Debtor 2 or non-filing spouse</b>
<b>2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.</b>	2. <b>\$3,508.51</b>	<b>\$0.00</b>
<b>3. Estimate and list monthly overtime pay.</b>	3. + <b>\$0.00</b>	<b>\$0.00</b>
<b>4. Calculate gross income. Add line 2 + line 3.</b>	4. <b>\$3,508.51</b>	<b>\$0.00</b>

Debtor 1 **Michael Wayne Gunter**  
 Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

	For Debtor 1	For Debtor 2 or non-filing spouse
<b>Copy line 4 here .....</b> ➔ 4.	<b>\$3,508.51</b>	<b>\$0.00</b>
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. <b>\$702.98</b>	<b>\$0.00</b>
5b. Mandatory contributions for retirement plans	5b. <b>\$0.00</b>	<b>\$0.00</b>
5c. Voluntary contributions for retirement plans	5c. <b>\$49.50</b>	<b>\$0.00</b>
5d. Required repayments of retirement fund loans	5d. <b>\$83.58</b>	<b>\$0.00</b>
5e. Insurance	5e. <b>\$358.89</b>	<b>\$0.00</b>
5f. Domestic support obligations	5f. <b>\$0.00</b>	<b>\$0.00</b>
5g. Union dues	5g. <b>\$0.00</b>	<b>\$0.00</b>
5h. Other deductions. Specify: _____	5h. + <b>\$0.00</b>	<b>\$0.00</b>
<b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	<b>\$1,194.95</b>	<b>\$0.00</b>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	<b>\$2,313.56</b>	<b>\$0.00</b>
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm	8a. <b>\$0.00</b>	<b>\$0.00</b>
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.		
8b. Interest and dividends	8b. <b>\$0.00</b>	<b>\$0.00</b>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c. <b>\$0.00</b>	<b>\$0.00</b>
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		
8d. Unemployment compensation	8d. <b>\$0.00</b>	<b>\$0.00</b>
8e. Social Security	8e. <b>\$0.00</b>	<b>\$0.00</b>
8f. Other government assistance that you regularly receive		
Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		
Specify: _____	8f. <b>\$0.00</b>	<b>\$0.00</b>
8g. Pension or retirement income	8g. <b>\$0.00</b>	<b>\$0.00</b>
8h. Other monthly income. Specify: _____	8h. + <b>\$0.00</b>	<b>\$0.00</b>
<b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. <b>\$0.00</b>	<b>\$0.00</b>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. <b>\$2,313.56</b>	+ <b>\$0.00</b> = <b>\$2,313.56</b>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.		
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.		
Specify: _____	11. + <b>\$0.00</b>	
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.	12. <b>\$2,313.56</b>	<b>Combined monthly income</b>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>		
<input checked="" type="checkbox"/> No. <b>None.</b>		
<input type="checkbox"/> Yes. Explain: _____		

**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b>	<b>Wayne</b>	<b>Gunter</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Melissa</b>	<b>Kay</b>	<b>Gunter</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>WESTERN DISTRICT OF VIRGINIA</b>		
Case number (if known)			

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

**Schedule J: Your Expenses**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household**

1. Is this a joint case?

- No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?  
 No  
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

	<input type="checkbox"/> No	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not list Debtor 1 and Debtor 2.	<input checked="" type="checkbox"/> Yes. Fill out this information for each dependent.....	Son	3	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Do not state the dependents' names.		Daughter	8	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes
				<input type="checkbox"/> No <input type="checkbox"/> Yes
				<input type="checkbox"/> No <input type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself and your dependents?
- No  
 Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4. The rental or home ownership expenses for your residence.

Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

- 4a. Real estate taxes  
 4b. Property, homeowner's, or renter's insurance  
 4c. Home maintenance, repair, and upkeep expenses  
 4d. Homeowner's association or condominium dues

	<u>Your expenses</u>
4.	\$675.00
4a.	_____
4b.	_____
4c.	_____
4d.	_____

Debtor 1 **Michael Wayne Gunter**  
 Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

		<u>Your expenses</u>
<b>5.</b>	<b>Additional mortgage payments for your residence</b> , such as home equity loans	5. _____
<b>6.</b>	<b>Utilities:</b>	
6a.	Electricity, heat, natural gas	6a. _____ <b>\$150.00</b>
6b.	Water, sewer, garbage collection	6b. _____
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. _____ <b>\$80.00</b>
6d.	Other. Specify: _____	6d. _____
<b>7.</b>	<b>Food and housekeeping supplies</b>	7. _____ <b>\$750.00</b>
<b>8.</b>	<b>Childcare and children's education costs</b>	8. _____ <b>\$400.00</b>
<b>9.</b>	<b>Clothing, laundry, and dry cleaning</b>	9. _____ <b>\$50.00</b>
<b>10.</b>	<b>Personal care products and services</b>	10. _____ <b>\$25.00</b>
<b>11.</b>	<b>Medical and dental expenses</b>	11. _____
<b>12.</b>	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. _____ <b>\$300.00</b>
<b>13.</b>	<b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. _____
<b>14.</b>	<b>Charitable contributions and religious donations</b>	14. _____
<b>15.</b>	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. _____
15b.	Health insurance	15b. _____
15c.	Vehicle insurance	15c. _____ <b>\$165.00</b>
15d.	Other insurance. Specify: _____	15d. _____
<b>16.</b>	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. _____
<b>17.</b>	<b>Installment or lease payments:</b>	
17a.	Car payments for Vehicle 1	17a. _____
17b.	Car payments for Vehicle 2	17b. _____
17c.	Other. Specify: <b>Rent-A-Center</b>	17c. _____ <b>\$87.00</b>
17d.	Other. Specify: <b>Storage Shed</b>	17d. _____ <b>\$160.00</b>
<b>18.</b>	<b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18. _____
<b>19.</b>	<b>Other payments you make to support others who do not live with you.</b> Specify: _____	19. _____

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**

- |   |            |
|---|------------|
| 20a. Mortgages on other property                  | 20a. _____ |
| 20b. Real estate taxes                            | 20b. _____ |
| 20c. Property, homeowner's, or renter's insurance | 20c. _____ |
| 20d. Maintenance, repair, and upkeep expenses     | 20d. _____ |
| 20e. Homeowner's association or condominium dues  | 20e. _____ |

**21. Other.** Specify: \_\_\_\_\_

21. + \_\_\_\_\_

**22. Calculate your monthly expenses.**

- |   |                       |
|---|-----------------------|
| 22a. Add lines 4 through 21.  | 22a. _____ \$2,842.00 |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. | 22b. _____            |
| 22c. Add line 22a and 22b. The result is your monthly expenses.                       | 22c. _____ \$2,842.00 |

**23. Calculate your monthly net income.**

- |   |                         |
|---|-------------------------|
| 23a. Copy line 12 (your combined monthly income) from Schedule I.                                       | 23a. _____ \$2,313.56   |
| 23b. Copy your monthly expenses from line 22c above.  | 23b. - _____ \$2,842.00 |
| 23c. Subtract your monthly expenses from your monthly income.<br>The result is your monthly net income. | 23c. _____ (\$528.44)   |

**24. Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes. Explain here:  
**None.**

**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b> First Name	<b>Wayne</b> Middle Name	<b>Gunter</b> Last Name
Debtor 2 (Spouse, if filing)	<b>Melissa</b> First Name	<b>Kay</b> Middle Name	<b>Gunter</b> Last Name
United States Bankruptcy Court for the: <b>WESTERN DISTRICT OF VIRGINIA</b>			
Case number (if known)			

Check if this is an amended filing

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

**X /s/ Michael Wayne Gunter**  
Michael Wayne Gunter, Debtor 1

Date **05/09/2017**  
MM / DD / YYYY

**X /s/ Melissa Kay Gunter**  
Melissa Kay Gunter, Debtor 2

Date **05/09/2017**  
MM / DD / YYYY

<b>Fill in this information to identify your case:</b>			
Debtor 1	<b>Michael</b> First Name	<b>Wayne</b> Middle Name	<b>Gunter</b> Last Name
Debtor 2 (Spouse, if filing)	<b>Melissa</b> First Name	<b>Kay</b> Middle Name	<b>Gunter</b> Last Name
United States Bankruptcy Court for the: <b>WESTERN DISTRICT OF VIRGINIA</b>			
Case number (if known) _____			<input type="checkbox"/> Check if this is an amended filing

## Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Hold Secured Claims

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Hold Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a debt?

Did you claim the property as exempt on Schedule C?

Creditor's name: **Rent-A-Center**

- Surrender the property.
- Retain the property and redeem it.
- Retain the property and enter into a *Reaffirmation Agreement*.
- Retain the property and [explain]:

No  
 Yes

Description of property securing debt: **Television**

- Creditor's name: **VA League Central Credit Union**
- Surrender the property.
  - Retain the property and redeem it.
  - Retain the property and enter into a *Reaffirmation Agreement*.
  - Retain the property and [explain]:

No  
 Yes

Description of property securing debt: **2005 Dodge Durango**

Debtor 1 Michael Wayne Gunter  
Debtor 2 Melissa Kay Gunter

Case number (if known) \_\_\_\_\_

**Part 2: List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

**Part 3: Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

/s/ Michael Wayne Gunter  
Michael Wayne Gunter, Debtor 1

/s/ Melissa Kay Gunter  
Melissa Kay Gunter, Debtor 2

Date 05/09/2017  
MM / DD / YYYY

Date 05/09/2017  
MM / DD / YYYY

**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b> First Name	<b>Wayne</b> Middle Name	<b>Gunter</b> Last Name
Debtor 2 (Spouse, if filing)	<b>Melissa</b> First Name	<b>Kay</b> Middle Name	<b>Gunter</b> Last Name
United States Bankruptcy Court for the: <b>WESTERN DISTRICT OF VIRGINIA</b>			
Case number (if known) _____			

Check if this is an amended filing

**Official Form 107**

**Statement of Financial Affairs for Individuals Filing for Bankruptcy**

**04/16**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Give Details About Your Marital Status and Where You Lived Before**

**1. What is your current marital status?**

- Married  
 Not married

**2. During the last 3 years, have you lived anywhere other than where you live now?**

- No  
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
<u>2430 Mimosa Dr., Apt. A</u> Number Street	From <u>2015</u> To <u>2015</u>	Number Street	From _____ To _____
<u>Lynchburg</u> City	State <u>VA</u> ZIP Code <u>24503</u>	City	State ZIP Code
Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
<u>1149 Izaak Walton Rd.</u> Number Street	From <u>2013</u> To <u>2015</u>	Number Street	From _____ To _____
<u>Madison Heights</u> City	State <u>VA</u> ZIP Code <u>24572</u>	City	State ZIP Code

**3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?**

(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No  
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 2: Explain the Sources of Your Income**

**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No

Yes. Fill in the details.

	Debtor 1	Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
<b>From January 1 of the current year until the date you filed for bankruptcy:</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$13,541.96</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$1,563.48</b>
<b>For the last calendar year:</b>  (January 1 to December 31, <u>2016</u> ) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$50,386.19</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$9,765.00</b>
<b>For the calendar year before that:</b>  (January 1 to December 31, <u>2015</u> ) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$35,881.00</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**

**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?

- No. Go to line 7.

- Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- No. Go to line 7.

- Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.

- No

- Yes. List all payments to an insider.

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

- No

- Yes. List all payments that benefited an insider.

Debtor 1 **Michael Wayne Gunter**  
 Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

#### Part 4: Identify Legal Actions, Repossessions, and Foreclosures

**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- No  
 Yes. Fill in the details.

Case title	Nature of the case	Court or agency	Status of the case
<b>Lokate Properties v. Michael Gunter</b>	<b>Garnishment</b>	<b>Lynchburg General District Court</b>	<input type="checkbox"/> Pending
		Court Name	<input type="checkbox"/> On appeal
		Number Street	<input checked="" type="checkbox"/> Concluded

Case number **GV15005518-03**

City	State	ZIP Code
------	-------	----------

Case title	Nature of the case
<b>Lokate, LLC v. Michael Gunter, Melissa Blankenship, Joyce Carter</b>	<b>Warrant in Debt Hearing: 05/10/17</b>

Case number **GV17-1720**

Court or agency	Status of the case
<b>Lynchburg General District Court</b>	<input checked="" type="checkbox"/> Pending
Court Name	<input type="checkbox"/> On appeal
Number Street	<input type="checkbox"/> Concluded

City	State	ZIP Code
------	-------	----------

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**

Check all that apply and fill in the details below.

- No. Go to line 11.  
 Yes. Fill in the information below.

<b>Chase Home Mortgage</b> Creditor's Name	Describe the property <b>1149 Izaak Walton Rd. Madison Heights, VA 24572</b>	Date <b>2016</b>	Value of the property
---	---	---------------------	-----------------------

Number Street

**Explain what happened**

- Property was repossessed.  
 Property was foreclosed.  
 Property was garnished.  
 Property was attached, seized, or levied.

City State ZIP Code

<b>Brownstown Properties</b> Creditor's Name	Describe the property <b>Garnished Wages</b>	Date <b>10/2016</b>	Value of the property <b>\$2,200.00</b>
---	---	------------------------	--

Number Street

**Explain what happened**

- Property was repossessed.  
 Property was foreclosed.  
 Property was garnished.  
 Property was attached, seized, or levied.

City State ZIP Code

Debtor 1 <b>Michael Wayne Gunter</b>	Debtor 2 <b>Melissa Kay Gunter</b>	Case number (if known)		
<b>Lokate Properties</b> Creditor's Name		Describe the property <b>Garnished Wages</b>	Date <b>2016-2017</b>	Value of the property <b>\$2,115.60</b>
Number Street	Explain what happened			
	<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input checked="" type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.			
City	State	ZIP Code		

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- No  
 Yes. Fill in the details.

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- No  
 Yes

#### Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- No  
 Yes. Fill in the details for each gift.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- No  
 Yes. Fill in the details for each gift or contribution.

#### Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- No  
 Yes. Fill in the details.

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 7: List Certain Payments or Transfers**

- 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

No

Yes. Fill in the details.

Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
<b>James River Legal Associates</b> 7601 Timberlake Road Number Street	<b>Chapter 7 Bankruptcy</b>	<b>04/12/2017</b>	<b>\$914.00</b>

**Lynchburg VA 24502**  
City State ZIP Code

Email or website address \_\_\_\_\_

Person Who Made the Payment, if Not You \_\_\_\_\_

- 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

- 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

- 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)**

No

Yes. Fill in the details.

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No  
 Yes. Fill in the details.

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No  
 Yes. Fill in the details.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No  
 Yes. Fill in the details.

Who else has or had access to it?	Describe the contents	Do you still have it?
<b>Simply Storage</b> Name of Storage Facility	<b>Old furniture</b>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
<b>2637 Lakeside Dr</b> Number Street		

**Lynchburg VA 24501**  
City State ZIP Code City State ZIP Code

**Part 9: Identify Property You Hold or Control for Someone Else**

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No  
 Yes. Fill in the details.

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

### Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- No  
 Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

- No  
 Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- No  
 Yes. Fill in the details.

### Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
 A member of a limited liability company (LLC) or limited liability partnership (LLP)  
 A partner in a partnership  
 An officer, director, or managing executive of a corporation  
 An owner of at least 5% of the voting or equity securities of a corporation

- No. None of the above applies. Go to Part 12.  
 Yes. Check all that apply above and fill in the details below for each business.

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- No  
 Yes. Fill in the details below.

Debtor 1 Michael Wayne Gunter  
Debtor 2 Melissa Kay Gunter

Case number (if known) \_\_\_\_\_

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X** /s/ Michael Wayne Gunter

Michael Wayne Gunter, Debtor 1

Date 05/09/2017

**X** /s/ Melissa Kay Gunter

Melissa Kay Gunter, Debtor 2

Date 05/09/2017

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- No  
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- No  
 Yes. Name of person \_\_\_\_\_

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF VIRGINIA  
LYNCHBURG DIVISION

In re **Michael Wayne Gunter**  
**Melissa Kay Gunter**

Case No. \_\_\_\_\_

Chapter **7** \_\_\_\_\_

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	<b>\$914.00</b>
Prior to the filing of this statement I have received.....	<b>\$914.00</b>
Balance Due.....	<b>\$0.00</b>

2. The source of the compensation paid to me was:

Debtor       Other (specify)

3. The source of compensation to be paid to me is:

Debtor       Other (specify)

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

05/09/2017

Date

/s/ Margaret C. Valois

Margaret C. Valois  
James River Legal Associates  
7601 Timberlake Road  
Lynchburg, VA 24502  
Phone: (434) 845-4529 / Fax: (434) 845-8536

Bar No. 66034

/s/ Michael Wayne Gunter

Michael Wayne Gunter

/s/ Melissa Kay Gunter

Melissa Kay Gunter

UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF VIRGINIA  
LYNCHBURG DIVISION

IN RE: **Michael Wayne Gunter**  
**Melissa Kay Gunter**

CASE NO

CHAPTER **7**

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 5/9/2017

Signature /s/ Michael Wayne Gunter  
Michael Wayne Gunter

Date 5/9/2017

Signature /s/ Melissa Kay Gunter  
Melissa Kay Gunter

Debtor(s): Michael Wayne Gunter  
Melissa Kay Gunter

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WESTERN DISTRICT OF VIRGINIA  
LYNCHBURG DIVISION

Appalachian Power  
PO Box 24401  
Canton, OH 44701

Creditors Collection Service  
PO Box 1022  
Wixom, MI 48393

Joyce Carter  
3101 Link Rd #78  
Lynchburg, VA 24503

Beacon Credit Union  
Attn: Bankruptcy Department  
PO Box 4319  
Lynchburg, VA 24502

Dish Network  
PO Box 94063  
Palatine, IL 60094

Lendmark Financial Services  
18013 Forest Rd, Ste. A-08  
Forest, VA 24551

Capital One  
PO Box 30285  
Salt Lake City, UT 84130-0285

EOS CCA  
700 Longwater Dr  
Norwell, MA 02061

Lendmark Financial Services  
105 Clarion Rd, Ste. K  
Altavista, VA 24517

Centra Emergency Services  
2010 Atherholt Rd  
Lynchburg, VA 24501

First Virginia Financial Service  
3226 Old Forest Rd.  
Lynchburg, VA 24501

Lokate LLC  
c/o Brownstone Properties, Inc.  
3720 Old Forest Rd.  
Lynchburg, VA 24501

Centra Medical Group  
PO Box 14000  
Belfast, ME 04915

Greensboro Radiology  
1331 N Elm St #200  
Greensboro, NC 27401

Lynchburg General District Cour  
905 Court St  
Lynchburg, VA 24504

Chase Mortgage  
PO Box 24696  
Columbus, OH 43224

Internal Revenue Service  
P O Box 7346  
Philadelphia, PA 19114-7346

Lynchburg General Hospital  
1901 Tate Springs Road  
Lynchburg, VA 24501

CNAC/TMC Finance, LLC  
2828 Candlers Mountain Rd  
Lynchburg, VA 24502

Internal Revenue Service  
Insolvency Unit  
400 N 8th St No. 76  
Richmond, VA 23219

Margaret C. Valois  
James River Legal Associates  
7601 Timberlake Road  
Lynchburg, VA 24502

Comcast  
2820 Linkhorne Dr  
Lynchburg, VA 24503

J. Frederick Watson, Esq.  
CASKIE & FROST  
2306 Atherholt Road  
Lynchburg, VA 24501

Navy Federal Credit Union  
820 Follin Ln  
Vienna, VA 22180

Cone Health  
PO Box 650292  
Dallas, TX 75265

Joyce Carter  
3101 Link Road, Apt. 78  
Lynchburg, VA 24503

Online Collections  
PO Box 1489  
Winterville, NC 28590

Convergent Outsourcing, Inc.  
PO Box 1022  
Wixom, MI 48393

Joyce Carter  
3101 Link Rd, Apt. 87  
Lynchburg, VA 24503

Optimum Outcomes, Inc.  
PO Box 660943  
Dallas, TX 75266

Debtor(s): Michael Wayne Gunter  
Melissa Kay Gunter

Document Case No. Chapter: 7  
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WESTERN DISTRICT OF VIRGINIA  
LYNCHBURG DIVISION

Rent-A-Center  
2323 Memorial Ave.  
Lynchburg, VA 24501

US Department of Education  
Direct Loan Servicing Center  
PO Box 5609  
Greenville, TX 75403

SCA Credit Services, Inc.  
1502 Williamson Rd NE  
Roanoke, VA 24012

Va Department Of Taxation  
Bankruptcy Unit  
P O Box 2156  
Richmond, VA 23218-0000

Southwest Credit Systems  
4120 International Parkway  
Suite 1100  
Carrollton, TX 75007

VA League Central Credit Union  
PO Box 11469  
Lynchburg, VA 24506

SRS, Inc.  
415 N Edgeworth St, Ste. 210  
Greensboro, NC 27401

Verizon Wireless  
PO Box 5029  
Wallingford, CT 06492

State Farm Life Insurance Compa  
PO Box 2364  
Bloomington, IL 61702

Virginia Department of Social S  
801 E Main Street  
Richmond, VA 23219

Suntan City

SunTrust  
PO Box 6600  
Hagerstown, MD 21741

Target Corporation  
c/o The Law Offices Michael I.  
2200 Northern Blvd, Ste. 110  
Greenvale, NY 11548

The City of Lynchburg, Virginia  
Billings & Collections  
PO Box 9000, Lynchburg, VA 2450

The Moses H. Cone Memorial Hosp  
1121 N Church St  
Greensboro, NC 27401

<b>Fill in this information to identify your case:</b>			
Debtor 1	<b>Michael</b> First Name	<b>Wayne</b> Middle Name	<b>Gunter</b> Last Name
Debtor 2 (Spouse, if filing)	<b>Melissa</b> First Name	<b>Kay</b> Middle Name	<b>Gunter</b> Last Name
United States Bankruptcy Court for the: <b>WESTERN DISTRICT OF VIRGINIA</b>			
Case number (if known) _____			
			<b>Check one box only as directed in this form and in Form 122A-1Supp:</b>
<input checked="" type="checkbox"/> 1. There is no presumption of abuse.			
<input type="checkbox"/> 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).			
<input type="checkbox"/> 3. The Means Test does not apply now because of qualified military service but it could apply later.			
			<input type="checkbox"/> Check if this is an amended filing

## Official Form 122A-1

### Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

#### Part 1: Calculate Your Current Monthly Income

##### 1. What is your marital and filing status? Check one only.

- Not married.** Fill out Column A, lines 2-11.
- Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.
- Married and your spouse is NOT filing with you. You and your spouse are:**
- Living in the same household and are not legally separated.** Fill out both Columns A and B, lines 2-11.
- Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

**Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.** 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	<b>Column A</b> <b>Debtor 1</b>	<b>Column B</b> <b>Debtor 2 or non-filing spouse</b>
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	<b>\$3,508.51</b>	<b>\$507.00</b>
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	<b>\$0.00</b>	<b>\$0.00</b>
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	<b>\$0.00</b>	<b>\$0.00</b>

Debtor 1 **Michael Wayne Gunter**  
 Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

*Column A*  
**Debtor 1**

*Column B*  
**Debtor 2 or  
 non-filing spouse**

**5. Net income from operating a business, profession, or farm**

<b>Debtor 1</b>	<b>Debtor 2</b>		
Gross receipts (before all deductions)	<b>\$0.00</b>	<b>\$0.00</b>	
Ordinary and necessary operating expenses	- <b>\$0.00</b>	- <b>\$0.00</b>	
Net monthly income from a business, profession, or farm	<b>\$0.00</b>	<b>\$0.00</b>	<b>Copy here → \$0.00</b>
			<b>\$0.00</b>

**6. Net income from rental and other real property**

<b>Debtor 1</b>	<b>Debtor 2</b>		
Gross receipts (before all deductions)	<b>\$0.00</b>	<b>\$0.00</b>	
Ordinary and necessary operating expenses	- <b>\$0.00</b>	- <b>\$0.00</b>	
Net monthly income from rental or other real property	<b>\$0.00</b>	<b>\$0.00</b>	<b>Copy here → \$0.00</b>
			<b>\$0.00</b>

**7. Interest, dividends, and royalties**

**8. Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: ..... ↓

For you.....	<b>\$0.00</b>
For your spouse.....	<b>\$0.00</b>

**9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act.

**\$0.00**

**\$0.00**

**10. Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

---



---

Total amounts from separate pages, if any.

+ \_\_\_\_\_ + \_\_\_\_\_

**11. Calculate your total current monthly income.**

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

<b>\$3,508.51</b>	+	<b>\$507.00</b>	<b>=</b>	<b>\$4,015.51</b>
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**Total current monthly income**

Debtor 1 **Michael Wayne Gunter**  
Debtor 2 **Melissa Kay Gunter**

Case number (if known) \_\_\_\_\_

**Part 2: Determine Whether the Means Test Applies to You**

---

**12. Calculate your current monthly income for the year.** Follow these steps:

12a. Copy your total current monthly income from line 11.....**Copy line 11 here → 12a.** **\$4,015.51**

Multiply by 12 (the number of months in a year).

**X 12**

12b. The result is your annual income for this part of the form.

**12b. \$48,186.12**

**13. Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.

**Virginia**

Fill in the number of people in your household.

**4**

Fill in the median family income for your state and size of household.....**13. \$97,731.00**

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

**14. How do the lines compare?**

14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse*.  
Go to Part 3.

14b.  Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2*.  
Go to Part 3 and fill out Form 122A-2.

**Part 3: Sign Below**

---

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

**X /s/ Michael Wayne Gunter**

Michael Wayne Gunter, Debtor 1

**X /s/ Melissa Kay Gunter**

Melissa Kay Gunter, Debtor 2

Date **5/9/2017**

MM / DD / YYYY

Date **5/9/2017**

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.